

SAFE AT HOME PROGRAM ENROLLING AGENCY TRAINING SURVEY

1) Agency Name: _____

2) Complete Mailing Address: _____

3) Contact Person: _____

4) Contact Phone Number (with area code): _____

5) Contact Email: _____

6) Does your agency have an immediate need for Safe at Home training?
Yes No

7) What operating system does your agency use?

Windows Vista

Windows XP

Windows 7

Linux

Mac OS

Other

8) Would your agency rather have advocates attend our webinar training on their own personal computer or does your agency prefer to provide a classroom environment? (Please note Safe at Home no longer provides in-person training. Your agency will need to provide a classroom training environment if employees do not have their own personal computers.)

Personal computer

Classroom environment

9) How many advocates directly assist with SAH applications at your agency? _____

10) In cases where the applicant speaks a language other than English, will your advocates read and complete the application materials for the applicant or will you allow applicants to read and complete their own application materials?

Advocate completes materials for applicant

Applicant reads and completes materials

11) Please provide the names and email addresses of any advocates who will directly assist clients with the Safe at Home application process so that we may invite them to the SAH webinar training. If you have more than five advocates who need training, please provide their names and addresses on an additional sheet of paper. Thank you!

Advocate Name	Email Address
1	
2	
3	
4	
5	